## PART B - ISSUE FEE TRANSMITTAL

575-290 B

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advanced orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

. CORRESPONDENCE ADDRESS	2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change
	INVENTOR'S NAME
	Street Address
1992	City, State and ZIP Code
OLE K. NILSSEN CAESAR DR.	CO-INVENTOR'S NAME
CAESAR DR. BARRINGTON, IL 60010	Street Address
Brand Inch City 12	Super Address
	City, State and ZIP Code
RAPER 10 BE ENTERED	Check if additional changes are on reverse side
SERIES CODE/SERIAL NO. FILING PATE TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT DATE MAILED
07/741,575 08/07/91 02	0 PASCAL, R 2502 05/0
First Named Applicant NILSSEN,	OLE K.
LE OF VENTION HIGH-FREQUENCY POWER SUPPLY	FOR THEANDESCENT LAMP
HIGH-FREQUENCY POWER. SUPPLY	
ATTY'S DOCKET NO.   CLASS-SUBCLASS   BATCH NO.	APPLN. TYPE SMALL ENTITY FEE DUE DATE DUE
Further correspondence to be mailed to the following:	4. For printing on the patent front
	4. For printing on the patent front page, list the names of not more than  2 registered actes to the state of the state o
	page, list the names of not more than  3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered
Further correspondence to be mailed to the following:  Ole K. Nilssen Caesar Drive Barrington, IL 60010	page, list the names of not more than  3 registered patent attorneys or agents OR alternatively, the name of a  2
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Further correspondence to be mailed to the following:  Ole K. Nilssen Caesar Drive Barrington, IL 60010  DO NOT USE 050 LP 05/12/92 07741575  1 2- 5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)	page, list the names of not more than  3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.  5  E THIS SPACE
Further correspondence to be mailed to the following:  Ole K. Nilssen Caesar Drive Barrington, IL 60010  DO NOT USE 050 LP 05/12/92 07741575	page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.  E THIS SPACE  42 565.00 CK  6a. The following fees are enclosed:    Substantial Company or com
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## Certificate of Mailing

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Commissioner of Patents and Trademarks

Washington, D.C. 2023

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This form is estimated to take 20 minutes to complete. Time will vary depending upon the needs of the individual applicant. Any comments on the amount of time you require to complete this form should be sent to the Office of Management and Organization, Patent and Trademark Office, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.